

LICENSE APPLICATION— LICENSES NOT REQUIRING AN APPROVED EDUCATION PROGRAM

PI-1602-NP (Rev 4-04)
Page 1

FOR INFORMATION CONTACT:

Telephone No. (608) 266-1027

Voice Mail No. 1-800-266-1027

Web Site

www.dpi.state.wi.us/dlsis/tel

WE WANT TO DO AN EXCELLENT JOB FOR YOU. HERE IS HOW YOU CAN HELP.

- ◆ We will be able to process your application much faster if all the necessary documentation is sent in along with this form.
- ◆ You can confirm that we have received your application by checking the DPI website at www.dpi.state.wi.us/dlsis/tel/lisearch.html.
- ◆ Please type or print legibly using black or blue ink. **Make a copy of your application and documentation for your files.**

LICENSE APPLICATION INFORMATION AND PROCEDURES

- I. **Applicant Information:** Please fill in all sections. Provide a primary phone number where you can be reached between 8 a.m. and 4 p.m. Central Standard Time.
- II. **Which 5-Year License(s) Are You Requesting?** This application shall be used by persons applying for one or more of the following licenses: **EDUCATIONAL INTERPRETER, ORIENTATION AND MOBILITY TEACHER, SCHOOL AUDIOLOGIST, SCHOOL OCCUPATIONAL THERAPIST, SCHOOL OCCUPATIONAL THERAPY ASSISTANT, SCHOOL PHYSICAL THERAPIST, SCHOOL PHYSICAL THERAPY ASSISTANT.** Please check the appropriate box and submit additional information as requested.
- III. **Post Secondary Education:** List degree(s) only with the most recent first. Attach 8.5 x 11 sheet if necessary.

PAYMENT/MAILING INSTRUCTIONS

CHECK OR MONEY ORDER: Make payable for \$100 to: Dept. of Public Instruction. Attach payment securely to the front of page 2 (page containing personal information). If paying by check/money order, do not send this page (page 1).

MAIL your fee, application materials, and documentation to the DPI address below. Since the fee covers the cost of application processing, **NO REFUNDS WILL BE MADE**, regardless of whether or not a license is issued. Fee is subject to change without notice.

DPI Teacher Licensing
Drawer 794
Milwaukee, WI 53293-0794

CREDIT CARD: MasterCard or VISA only. Fill in below. ATTACH THIS PAGE (with original signature) on top of other application pages.

Account Number

☐ MasterCard☐ VISA

				—					—					—				
--	--	--	--	---	--	--	--	--	---	--	--	--	--	---	--	--	--	--

Expiration Date

Month — Year

Amount

\$100

Signature





Wisconsin Department of Public Instruction

LICENSE APPLICATION— LICENSES NOT REQUIRING AN APPROVED EDUCATION PROGRAM

PI-1602-NP (Rev 04-04)

Page 2

FOR INFORMATION CONTACT:

Telephone No. (608) 266-1027

Voice Mail No. 1-800-266-1027

Web Site

www.dpi.state.wi.us/dlsis/tel

This form is available at www.dpi.state.wi.us/dlsis/tel/applications.html

I. APPLICANT INFORMATION

Legal Name	First	Middle	Last
Previous Name(s)	Social Security Number		Date of Birth Mo./Day/Yr.
Address			P.O. Box
City	State	Zip Code	Zip Plus 4 digits
Email Address			
Primary Telephone (include area code)	Ext.	Alternate Telephone (include area code)	Ext.
Current District of Employment	<input type="checkbox"/> Not currently under district contract	Most Recent Wisconsin Education License Issue Year Expire Year	

II. WHICH LICENSE(S) ARE YOU REQUESTING? (License Begin Date: July 1,)

For Initial License Only Include transcript for all initial licenses. To renew, use Form 1602-5R (5 yr licenses) or 1602-2R (2 yr licenses).

☐ Educational Interpreter ☐ Orientation and Mobility Teacher ☐ School Audiologist

For Initial License or Renewal

Include a photocopy of your Dept. of Regulation & Licensing wallet card.

<input type="checkbox"/> School Occupational Therapist	<input type="checkbox"/> I hold a valid license issued by the WI Dept. of Regulation and Licensing
<input type="checkbox"/> School Occupational Therapist Assistant	<input type="checkbox"/> I hold a valid license issued by the WI Dept. of Regulation and Licensing
<input type="checkbox"/> School Physical Therapist	<input type="checkbox"/> I hold a valid license issued by the WI Dept. of Regulation and Licensing
<input type="checkbox"/> School Physical Therapist Assistant	I hold a valid license issued by the WI Dept. of Regulation and Licensing

III. POST SECONDARY EDUCATION

List most Recent Degree(s) First

Institution	Location City/State	Degree/Certification & Grad Date	Program Area

Applicant must also complete and sign the attached Conduct and Competency Review Form (PI-1602-A)

For DPI Use Only	For Bank Use Only	
<input type="checkbox"/> FP	Amount of Remittance	Date Stamp
<input type="checkbox"/> Conduct	\$100	

**CONDUCT AND COMPETENCY REVIEW**

PI-1602-A (Rev. 3-03)

Page 1

Application forms are available at: www.dpi.state.wi.us/dlsis/tel/applications.html**ANSWER ALL QUESTIONS**

1. This form **must** be completed and included with your licensing application. Failure to complete this form will delay the processing of your application.
2. **Your signature on this form must be notarized. Most schools have a notary public on staff.**

For purposes of this application, "teaching" applies to all licensed school personnel which includes, but is not limited to, classroom teachers, counselors, social workers, psychologists, administrators, school library media specialists, substitute teachers, special education aides, etc.

<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> PR* <small>Previously Reported</small>	1. Have you ever been disciplined for alleged misconduct in the course of any employment or as a member of any licensed or regulated profession, including but not limited to verbal, physical, or sexual abuse or harassment?
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> PR	2. Have you ever resigned, been disciplined or dismissed from any teaching or other school position, in part, for alleged (check any which apply) <input type="checkbox"/> immoral conduct or <input type="checkbox"/> incompetence <i>Definitions on next page.</i>
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> PR	3. Have you ever had a certificate or license to teach or perform other school duties denied, revoked or suspended?
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> PR	4. Is disciplinary action of your educationally related license or employment currently pending in any jurisdiction?
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> PR	5. Have you ever been convicted of violating any civil law, local ordinance, state law, or federal law for actions involving sexual conduct, physical abuse of a child, and/or contributing to the delinquency of a child?
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> PR	6. Have you ever been convicted of any criminal offense (including <i>criminal</i> traffic matters, not general traffic violations) in any jurisdiction? (check any which apply) <input type="checkbox"/> felony or <input type="checkbox"/> misdemeanor
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> PR	7. Have you ever participated in a deferred prosecution program resulting from a criminal investigation?
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> PR	8. Are you currently on probation in any jurisdiction?
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> PR	9. Have you ever been acquitted or found not guilty of a criminal offense involving sexual conduct or harm or threat of harm to another, for reasons of insanity, mental disease or defect, diminished mental capacity or comparable legal defense or basis?
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> PR	10. Is any criminal charge or investigation pending against you in any jurisdiction?
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> PR	11. Have you (or a school district where you worked) ever been a party to a civil settlement, award, or agreement of any kind that involved an allegation concerning your conduct as an educator or in an educationally related position?
12. Carefully read item number 2 of the instructions on the following page to determine whether or not you are required to submit fingerprint cards with your license application. Check the appropriate box(es) below to indicate your response. <input type="checkbox"/> I am required to submit fingerprint cards with my application. Indicate status of cards below. <input type="checkbox"/> Completed cards are enclosed OR <input type="checkbox"/> Cards will be submitted separately. <input type="checkbox"/> I am not required to submit fingerprint cards with my application. I understand that I may be required to supply proof that cards are not required at this time.	
For any "Yes" response to questions 1-11, attach a written 8½" x 11" explanation. Submit certified copies of any criminal complaint and if convicted, a copy of the criminal judgment. Also, submit any other relevant court documents pertinent to any of the questions raised.	

*If you have reported a "Yes" response on a previous application, check PR (previously reported) instead of Yes on this application **if no further conviction(s) has occurred.**

IMPORTANT: You must respond to ALL questions 1-12.

UNDER OATH , I swear that all information on this form and the accompanying license application and documentation are true to the best of my knowledge. Any false statements may result in denial, revocation, or suspension of license.	
I HEREBY AUTHORIZE any of my previous employers, law enforcement agencies, and the courts to release, to the Wisconsin Department of Public Instruction, information which pertains to my responses to questions on this form.	
Name <i>Print or type</i>	Sworn and signed before me this ____ day of _____ in the year _____.
Signature (<i>Sign in blue or black ink, in presence of a Notary Public</i>) ➤	_____ Notary Public, _____
Social Security No.**	My commission expires on _____

**Collection of social security number is a requirement of s. 118.19(1m) and (1r). The social security number may be released to the Department of Justice, Department of Revenue, and the Department of Workforce Development. Such information is made available to these governmental agencies for official purposes only.

**INSTRUCTIONS AND DEFINITIONS
CONDUCT AND COMPETENCY REVIEW FORM (PI-1602-A)**

The Conduct and Competency Review Form is a screening method to protect children. While the vast majority of educators are not a danger to the safety and education of our children, there are exceptions to the rule. Some people use the profession to have access to children and to prey upon them. Because of these people, the department must investigate the backgrounds of all license applicants. The questions contained in the conduct and competency review form have been developed to alert the department to cases that warrant further investigation. A “yes” answer to a question or an arrest record **does not** automatically make you ineligible for licensure. Each situation is investigated independently and the final decision is made on a case-by-case basis. Your cooperation in protecting our children is greatly appreciated.

1. **Respond to all questions.** We cannot issue a license unless all questions are answered. Use black or blue ink only. *Submitting a fully and correctly completed form with notarized signature will speed processing of your application.*
2. **Fingerprint Cards:** Read **ALL** the criteria below carefully. Determine whether fingerprint cards are required in your situation and indicate your response in item 12 of the Conduct and Competency Review. (If fingerprinting is required, your prints must be prepared on cards obtained directly from the Department of Public Instruction.)

- If you have worked, resided, or attended college in a state other than Wisconsin, a listed territory (American Samoa, Guam, Puerto Rico, Commonwealth of the Northern Mariana Islands, or Virgin Islands), Canada, or Great Britain in the last twenty years after age 17, **you must submit fingerprint cards** with your license application.
- Even if you previously submitted fingerprint cards to the Department of Public Instruction **you must submit fingerprint cards again if, since the previous submission, you have worked, resided, or attended college in any of the locations listed above.** (If you previously submitted cards that met approved FBI/CIB standards *and* have not worked, resided, or attended college in any of the locations above since submitting your cards to DPI, then new cards are not required.)
- If your license application contains a non-Wisconsin mailing address, you must submit fingerprint cards unless the following exception applies. If you have never worked, resided, or attended college in a state other than Wisconsin, a U.S. territory listed above, Canada, or Great Britain you are not required to submit fingerprint cards.

How to Obtain Fingerprint Cards: To request cards and instructions from DPI, call 1-800-266-1027 or send an e-mail request to tcert@dpi.state.wi.us. Be sure to include your complete mailing address in your request. You will be sent a Federal Bureau of Investigation (FBI) card and a Wisconsin Crime Information Bureau (CIB) card which are preprinted with DPI's code. Your prints must be prepared, by a law enforcement official, on the two cards provided by DPI.

NOTE: Incomplete, or incorrectly prepared cards, will be returned to you for resubmission until they are prepared as specified in the instructions provided. See www.dpi.state.wi.us/dlsis/tel/fphelp.html for instructions on completing the cards correctly, information about fingerprinting services, and an e-mail link for requesting cards from DPI.

3. **Notarization Requirement:** Your signature on the Conduct and Competency form must be notarized. Notary Publics are available at schools, banks, and post offices. Other options include a clerk or deputy clerk of a court of record, a court commissioner, a register or deputy register of deeds, a judge, or a county or deputy county clerk. For more information about notarization see Frequently Asked Questions about notarization at: www.dpi.state.wi.us/dlsis/tel/notary.html.

Definitions

“Immoral Conduct” means conduct or behavior that is contrary to commonly accepted moral or ethical standards and that endangers the health, safety, welfare, or education of any pupil. (Sec. 115.31(1)(c), Wis. Stats.)

“Incompetence” means a pattern of inadequate performance of duties or the lack of ability, legal qualifications or fitness to discharge required duties, and which endangers the health, welfare, safety or education of any pupil. (PI 34.35(1)(d), Wis. Admin. Code)

Reminders

Issuance or renewal of any license or permit by DPI is conditional upon the receipt of a satisfactory background investigation. (Sec. 118.19(10)(e), Wis. Stats.)

All information received from the Federal Bureau of Investigation and the Wisconsin Department of Justice as part of a background check, remains confidential. (Sec. 118.19(10)(f), Wis. Stats.)

You will be notified only if the department determines that the result of the background investigation is unsatisfactory.